REMARKS

IN THE CLAIMS

Claim 1 was rejected under §103 as unpatentable over Engleson (U.S. Patent No. 5,781,442) in view of Adamson, et al. (U.S. Pub. No. 2002/0128871). The Examiner states that it would have been obvious to one of ordinary skill in the art to modify the server of Engleson by adding a node for a manufacturer (the drug pump manufacture information) to make the overall system more reliable and smooth operation of the pump as well as alert the operator on any types of abnormalities. Engleson discloses a patient management system capable of monitoring, controlling, and tracking the administration of care in a health care institution e.g., a hospital. Adamson discloses an information exchange infrastructure creating an information supply chain and automatically generating information products related to health services, transactions, or requests. There is no suggestion in either of the references that they be combined in the manner suggested by the Examiner. Absent such a suggestion, a person skilled in the art who was looking for a solution to the problems of tracking the administration of care in a health care institution as exhibited by Engleson would hardly be disposed on any objective basis, to consider a reference like Adamson, which is not only unconcerned with the administration of patient care at all but which shows absolutely no recognition of the problem of tracking the administration of care in a health care institution, let alone any structure that would solve it.

The invention of claim 1 provides for a communications environment for *drug pump* manufactures and clinicians to directly assess not only the information supplied by an implantable drug pump, but also integrate data from other data sources, such as pharmacies, therapeutic agent producers, implantable device manufacturers, other treatment providers, and the like. This gives direct connectivity between the patient, the implantable drug pump manufacturer, the physician, the pharmacist, and the implantable device surgeon with the implantable drug pump.

The structure that would result from the Examiner's proposed combination does not meet the terms of claim 1. Such claim recites "a computerized network of patient nodes, clinician nodes, pharmaceutical nodes, drug pump manufacturer nodes and means for configuring implantable drug pumps with data gathered from a patient, a clinician, a drug pump

manufacturer, and a pharmacy. By contrast, neither Engleson nor Adamson disclose obtaining information from a drug pump manufacturer such as required by claim 1. At best, Adamson only discloses obtaining information from pharmaceutical manufacturing nodes. The proposed combination of Engleson and Adamson still lacks a drug pump manufacturer and any coordination or interaction with the drug pump manufacturer. Therefore, the combination that would result would still lack a computerized network of patient nodes, clinician nodes, pharmaceutical nodes, drug pump manufacturer nodes and means for configuring implantable drug pumps with data gathered from a patient, a clinician, a drug pump manufacturer, and a pharmacy. Therefore, claim 1 is patentably distinct from the combination of Engleson and Adamson.

Claims 2 and 3 depend from allowable base claim 1 and, therefore, are also patentably distinct from the combination of Engleson and Adamson.

A similar argument is applicable for claims 4-31 and, therefore, claims 4-31 are therefore patentably distinct from Engleson and Adamson.

In light of the above, applicant respectfully submits that claims 1-31 are in condition for allowance. As these are the only claims pending in this application, issuance of a Notice of Allowance is courteously solicited.

Please treat any communication filed at any time in this application requiring a petition for an extension of time under 37 CFR 1.136(a) towards timely submission as incorporating a proper petition for an extension of time and the appropriate length of time. To the extent any communication in this application are not accompanied by a payment sufficient to cover the required extension of time fees it is requested that such deficiency be charged to Deposit Account No. 06-1910.

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